PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10634378

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			On		(Ooldmir 2)			RATE	FEE	OR 1		
FOR			≪ ()		A 11 (1) 45	AULIADED EVEDA					RATE	FEE
			NUMBER FILED			BER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			多 minus 3 =		*			X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than z	ero, enter	"0" in c	column 2		TOTAL	375	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)	(Colum			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	CLAIM	=		X42=		OR	X84=	
	THOTTHEOL	NIAMONOFIM	OLIN LL DE	I ENDEN	CLAIIVI		ן י	+140=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)	× '	ADDIT. FEE			ADDII. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-	11	X42=		OR	X84=	
L.,	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		ا ا	+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colum	mn 2\	(Column 2)	P	ADDIT. FEE I		lori	ADDIT. FEE	
		CLAIMS		(Colur HIGH		(Column 3)	1 -	1	4001			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=			X84=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDENT	CLAIM		!		·	OR		
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er fou	nd in the app	ropriate box	cin col	umn 1.	